

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09/980833

FILING DATE

APPLICANT(S)

8/5/4 CLAIMS

- AS FILED -	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.				
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TOTAL IND.		↓ 2	↓	/				
TOTAL DEP.	←	27	←	13	←			
TOTAL CLAIMS		29		14				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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U.S. DEPARTMENT OF COMMERCE
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